| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 |  |  |  |                                      |   |  |       |                     | Application or Docket Number |    |                     |                        |
|--|--|--|--|--------------------------------------|---|--|-------|---------------------|------------------------------|----|---------------------|------------------------|
|  |  |  |  |                                      |   |  |       |                     | 10                           | 5  | 74974               | •                      |
| CLAIMS AS FILED - PART I   |  |  |  |                                      |   |  |       | SMALL ENT           | TTY ,                        |    | OTHER               | THAN                   |
|  |  |  | (Column 1)   |                                      | (Column 2)                                |  | TYPE  |                     | 应                            | OR | SMALL ENTITY        |                        |
| U.S. NATIONAL STAGE FEES   |  |  |  |                                      |   |  |       | RATE                | FEE                          | ]  | RATE                | FEE                    |
| BASIC FEE  |  |  | SMALL ENT. = \$ 150  |                                      | LARGE ENT. = \$ 300                       |  |       | BASIC FEE           | (50                          | OR | BASIC FEE           |                        |
| EXAMINATION FEE  |  |  |  | PCT Article 33(1)-<br>\$ 50 / \$ 100 |   | All other situations = \$ 100 / \$ 200 |       | EXAM. FEE           | 601                          |    | EXAM. FEE           |                        |
| SEARCH FEE   |  |  | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |                                      | All other situations =<br>\$ 250 / \$ 500 |  |       | SEARCH FEE          | <i>व</i> र्ड ०               |    | SEARCH FEE          |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus 100 =  |                                      | / 50 <b>=</b>                             |  |       | X \$ 125 =          |                              |    | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 18 mi  | nus 20 =                             | *   |  |       | X \$ 25 =           |                              | OR | X \$ 50 =           |                        |
| INDEPENDENT CLAIMS   |  |  | minus 3 =  |                                      | *   |  |       | X \$ 100 =          |                              | OR | X \$ 200 =          | ,                      |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PR  | ESENT  |                                      |   |  |       | + \$ 180 =          |                              | OR | + \$ 360 =          |                        |
| * If the difference in column 1 is less than zero, enter               |  |  |  |                                      | o" in co                                  | lumn 2                                 |       | TOTAL               |                              | OR | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)          |  |  |  |                                      |   |  |       | SMALL E             | NTITY                        | OR | OTHER<br>SMALL E    |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                            |  | HIGH<br>NUM<br>PREVIO<br>PAID        | BER<br>DUSLY                              | PRESENT<br>EXTRA                       |       | RATE                | ADDI-<br>TIONAL<br>FEE       |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *  | Minus ,  | **                                   |   | =                                      |       | X \$ 25 =           |                              | OR | X \$ 50 =           |                        |
|  | Independent                                    | *  | Minus  | ***                                  |   | =                                      |       | X \$ 100 =          |                              | OR | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                      |   |  |       | + \$ 180 =          |                              | OR | + \$ 360 =          |                        |
|  |  |  |  |                                      |   |  | '     | TOTAL ADDIT.<br>FEE |                              | OR | TOTAL ADDIT.<br>FEE |                        |
|  |  | (Column 1)   |  | (Colur                               |   | (Column 3)                             |       |                     |                              | _  |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                            |  | HIGH<br>NUM<br>PREVIO<br>PAID        | BER<br>DUSLY                              | PRESENT<br>EXTRA                       |       | RATE                | ADDI-<br>TIONAL<br>FEE       |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *  | Minus  | **                                   |   | =                                      |       | X \$ 25 =           |                              | OR | X \$ 50 =           | ·                      |
|  | Independent                                    | *  | Minus  | ***                                  |   | =                                      |       | X \$ 100 =          |                              | OR | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                      |   |  |       | + \$ 180 =          | , , , , , ,                  | OR | + \$ 360 =          |                        |
|  |  |  |  |                                      | -   |  | •     | TOTAL ADDIT.<br>FEE |                              | OR | TOTAL ADDIT.<br>FEE |                        |
| •  | . If the entry in colu                         | umn 1 is less than the   | e entry in column  | 2, write "0" i                       | n columr                                  | . 13.                                  |       |                     |                              |    | ·                   | ·                      |
| **   | If the "Highest Nu<br>If the "Highest Nu       | umber Previously Pai<br>umber Previously Pai<br>mber Previously Paid | Id For" IN THIS SI<br>Id For" IN THIS SI                             | PACE is less<br>PACE is less         | s than '2(<br>s than '3'                  | )', enter "20".<br>, enter "3".        | in th | e annropriate box   | in column 1                  |    |                     |                        |